

05-29-01

PTO/SB/21 MODIFIED BY AT&T CORP.



TRANSMITTAL FORM

Application Number 09/724577

Filing Date 11/28/2000

First Named Inventor James Mason Lipsit

Group Art Unit 2681

Examiner Name

Attorney Docket Number 1999-0074

Total Number of Pages in this Submission

Enclosures (check all that apply)

- ☒ Fee Transmittal Form
- ☐ Fee Attached
- ☐ Amendment / Response
- ☐ After Final
- ☐ Affidavits / Declaration(s)
- ☐ Petition for Extension of Time Request
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement
- ☐ Certified Copy of Priority Document(s)
- ☒ Response to Missing Parts under 37 CFR 1.52 or 1.53
- ☐ Response to Missing Parts/Incomplete Application

- ☐ Assignment & Recordation Cover Sheet
- ☐ Drawing(s) & Letter to Official Draftsman
- ☐ Licensing-related Papers
- ☐ Petition Routing Slip (PTO/SB/69) and Accompanying Petition
- ☐ Petition to Convert a Provisional Application
- ☐ Power of Attorney, Revocation Change of Correspondence Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund

- ☐ After Allowance Communication to Group
- ☐ Appeal Communications to Board of Appeals and Interferences
- ☐ Appeal Communications to Group (Appeal Notice, Brief, Reply Brief)
- ☐ Proprietary Information
- ☐ Status Letter
- ☒ Return Receipt Postcard
- ☐ Additional enclosure(s) (please identify below)

Declaration for Utility or Design Patent Application

Remarks

CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label

(Insert Customer No. or Attach bar code label here)

☒ Correspondence address below

NAME	Samuel H. Dworesky		
ADDRESS	AT&T CORP. P.O. Box 4110		
CITY	Middletown	STATE	New Jersey
COUNTRY	United States of America	ZIP CODE	07748-4110
		FAX	732-368-6932

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Rohini K. Garg	Reg. #	45272
TELEPHONE	908 221-5756		
SIGNATURE	<i>Rohini K. Garg</i>	DATE	5/25/01

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Type or Printed Name

Signature

Date

SEND TO: Assistant Commissioner for Patents, Washington, D.C. 20231



Page 1 of 1
#24 7/2/01

UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
www.uspto.gov

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
09/724,577	11/28/2000	James M. Lipsit	1999-0074

CONFIRMATION NO. 6094

FORMALITIES LETTER



OC000000005905714

Samuel H. Dworetsky
AT&T CORP.
P.O. BOX 4110
MIDDLETOWN, NJ 07748-4801

Date Mailed: 03/27/2001

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

Filing Date Granted

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.
Applicant must submit \$ 710 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).
- Total additional claim fee(s) for this application is \$1494.
 - \$774 for 43 total claims over 20.
 - \$720 for 9 independent claims over 3 .
- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- The balance due by applicant is \$ 2334.

A copy of this notice MUST be returned with the reply.

MRS
Customer Service Center
Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

05/31/2001 BNGUYEN1 00000073 012745 09724577
01 FC:101 710.00 CH
02 FC:103 774.00 CH
03 FC:102 720.00 CH
04 FC:105 130.00 CH

IN THE UNITED STATES
PATENT AND TRADEMARK OFFICE

#3471
7/2/01

PE JC165
MAY 25 2001
PAT & TRADEMARK OFFICE

Applicant(s): James Mason Lipsit
Attorney Docket No.: 1999-0074
Application No.: 09/724577
Filing Date: 11/28/2000
Examiner Name:
Group Art Unit: 2681
Title: Testing Methods And Apparatus For Wireless Communications

ASSISTANT COMMISSIONER FOR PATENTS
WASHINGTON, D.C. 20231
Box: Missing Parts

RESPONSE TO NOTICE TO FILE MISSING PARTS OF APPLICATION
Filing Date Granted

Enclosed is the Declaration and Power of Attorney relating to the above-identified application.

Please charge **AT&T Corp. Deposit Account No. 01-2745** in the amount of \$130.00 to cover the filing fee surcharge. A duplicate copy of this letter is enclosed. In the event of any non-payment or improper payment of a required fee, the Assistant Commissioner is authorized to charge or to credit **AT&T Corp. Deposit Account No. 01-2745** as required to correct the error.

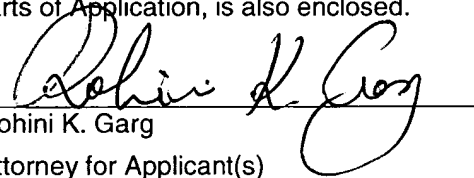
Please charge **AT&T Corp. Deposit Account No. 01-2745** in the amount of \$ 2,204.00 to cover the basic filing fees, as indicated in our Fee Transmittal Letter, copy of which is attached herewith, sent with the original filing on 11/28/2000.

A copy of PTO-1533, Notice to File Missing Parts of Application, is also enclosed.

Date:

5/25/01

By:


Rohini K. Garg
Attorney for Applicant(s)

Reg. No.: 45272

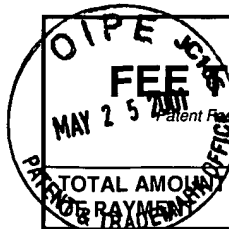
T: 908-221-5756

F: 732-368-6932

AT&T CORP.

P.O. Box 4110

Middletown, New Jersey 07748-4110

 <h1 style="margin: 0;">FEE TRANSMITTAL</h1> <p style="font-size: small; margin: 0;">Patent Fees are subject to annual revision.</p>		* Complete Unknown		
		Application Number	09/724577	
		Filing Date	11/28/2000	
		First Named Inventor	James Mason Lipsit	
		Examiner Name		
TOTAL AMOUNT DUE		\$130.00\$0	Group/Art Unit	2681
			Attorney Docket No.	1999-0074

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 01-2745
 Deposit Account Name AT&T CORP.

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 ☐ Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing Date of the Notice of Allowance

FEE CALCULATION**1. FILING FEE**

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
101	710	Utility(37CFR 1.53(b)) / CPA(37CFR 1.53(d)) Filing Fee	
106	320	Design Filing Fee	
108	710	Reissue Filing Fee	
114	150	Provisional Filing Fee	
SUBTOTAL (1)			0

2. **CLAIMS** ☐ Filing Under 37CFR 1.53 (b)
☐ CPA Under 37CFR 1.53 (d)
☐ Amendment

	Extra Claims		Fee from below		Fee Paid
Total	- 20 =	0	x	18	= 0
Ind.	- 3 =	0	x	80	= 0
Multiple Dependent Claims					= 0

Large Fee Code	Entity Fee(\$)	Fee Description
103	18	Claims in excess of 20
102	80	Independent Claims in excess of 3
104	270	Multiple Dependent Claims
109	80	Reissue independent claims over original patent
110	18	Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		0

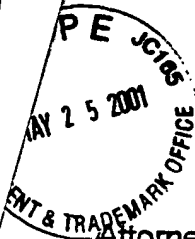
FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Fee Code	Entity Fee(\$)	Fee Description	Fee Paid
105	130	Surcharge - late filing fee or oath	130
127	50	Surcharge - late provisional filing fee or cover sheet	
139	130	Non-English specification	
147	2520	For filing a request for reexamination	
112*	920	Requesting publication of SIR prior to Examiner action	
113*	1840	Requesting publication of SIR after Examiner action	
115	110	Extension for reply within first month	
116	390	Extension for reply within second month	
117	890	Extension for reply within third month	
118	1390	Extension for reply within fourth month	
128	1890	Extension for reply within fifth month	
119	310	Notice of Appeal	
120	310	Filing a brief in support of an appeal	
121	270	Request for oral hearing	
138	1510	Petition to institute a public use proceeding	
140	110	Petition to revive - unavoidable	
141	1240	Petition to revive - unintentional	
142	1240	Utility issue fee (or reissue)	
143	440	Design issue fee	
122	130	Petitions to the Commissioner	
123	50	Petitions related to provisional applications	
126	240	Submission of Information Disclosure Statement	
581	40	Recording each patent assignment per property (times number of properties)	
146	710	Filing a submission after final rejection(37 CFR 1.129(a))	
149	710	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify)			
Other fee (specify)			
* Reduced by Basic Filing Fee Paid			
SUBTOTAL(3)			0

SUBMITTED BY

Typed or Printed Name		Rohini K. Garg		Complete (if applicable)	
Signature		Date		Reg. Number	45272
		5/25/01			
				Deposit Account User ID	

SEND TO: Assistant Commissioner for Patents, Washington/D.C. 20231



Attorney's Initials:

COMMISSIONER FOR PATENTS, BOX

mil

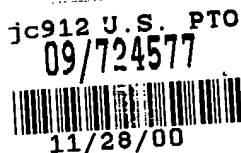
☒ Express Mail No. EL 700 776 915 US
☐ Certificate of Mailing

Docket No. *1999-0074 (AWS470)*
Applicant *J. LIPST*

Application No.
Filing Date

- | | |
|--|---|
| <input checked="" type="checkbox"/> Specification <i>20</i> # of Pages | <input type="checkbox"/> Assoc./Power of Attorney |
| <input checked="" type="checkbox"/> Claims <i>18</i> # of Pages | <input type="checkbox"/> Assignment |
| <input checked="" type="checkbox"/> Abstract <i>1</i> # of Pages | <input type="checkbox"/> Recordation Form Cover Sheet |
| <input checked="" type="checkbox"/> Drawings <i>10</i> # of Sheets | <input type="checkbox"/> IDS (Information Disclosure Statement) |
| <input type="checkbox"/> Response to O.A. (Type) | <input checked="" type="checkbox"/> Oath and Declaration <i>UNSIGNED</i> |
| <input type="checkbox"/> Response to Notice to File Missing Parts | <input checked="" type="checkbox"/> PTO 1449 Form with <i>12</i> references |
| <input type="checkbox"/> Amendment | <input type="checkbox"/> Preliminary Amendment |
| <input type="checkbox"/> Notice of Appeal | <input checked="" type="checkbox"/> Transmittal Letter <input checked="" type="checkbox"/> Fee Transmittal Form |
| <input type="checkbox"/> Appeal Brief | <input type="checkbox"/> Issue Fee Transmittal |
| <input type="checkbox"/> Other | <input type="checkbox"/> Letter to Official Draftsman |
| <input type="checkbox"/> PCT Request Form | <input type="checkbox"/> Extension of Time |
| <input type="checkbox"/> PCT Demand Form | |
| <input type="checkbox"/> PCT Invitation to Correct | |

☐ Formal



(103567-156924)